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## FISCAL IMPACT REPORT

SPONSOR Lopez ORIGINAL DATE 02/08/10  
LAST UPDATED \_\_\_\_\_ HB \_\_\_\_\_  
SHORT TITLE Adolescent Birth Rate Reduction Task Force SM 28  
ANALYST Chabot

### ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

|              | FY10 | FY11 | FY12 | 3 Year<br>Total Cost | Recurring<br>or Non-Rec | Fund<br>Affected |
|--------------|------|------|------|----------------------|-------------------------|------------------|
| <b>Total</b> |      | NFI  | NFI  |                      |                         |                  |

(Parenthesis ( ) Indicate Expenditure Decreases)

Relates to SJM 3

### SOURCES OF INFORMATION

LFC Files

#### Responses Received From

Children, Youth and Families Department (CYFD)

Department of Health (DOH)

New Mexico Health Policy Commission (HPC)

Public Education Department (PED)

Workforce Solutions Department (WSD)

### SUMMARY

#### Synopsis of Bill

Senate Memorial 28 resolves DOH be requested to convene a working group of representatives from PED, CYFD, WSD, HSD, the New Mexico Forum for Youth, the Children's Cabinet, the New Mexico Teen Pregnancy Coalition and county and local governments to develop a single, well-planned, comprehensive strategy for reducing adolescent births, unintended pregnancy, improve reproductive health outcomes for youth, and develop a continuum of services to prevent adolescent pregnancy and provide support to adolescent parents.

### FISCAL IMPLICATIONS

Although there is a cost to agencies organizing and participating in a workgroup of this magnitude, no agencies reported any fiscal impact.

## **SIGNIFICANT ISSUES**

DOH reports in 2007, the New Mexico teen birth rate for 15-17 year olds was 32.9 per 1,000 females, nearly one and one-half times the national rate of 22.2 per 1,000 females. In New Mexico, Hispanic and American Indian teens have the highest teen birth rates nearly four times the rate for whites and five times the rate for Asian teens. DOH, in collaboration with the New Mexico Teen Pregnancy Coalition, recommends five strategies to reduce teen pregnancy: family planning clinical services, comprehensive sex education, male involvement program, adult-teen communication programs, and service learning programs.

PED currently administers the GRADS (Graduation Reality and Dual-Role Skills) teen parenting program in 33 schools in 25 school districts which assists teenage parents.

## **ADMINISTRATIVE IMPLICATIONS**

All participating agencies, and especially DOH, would have to dedicate staff and resources to the working group.

## **TECHNICAL ISSUES**

The memorial does not specify when the report needs to be completed and how the results are to be presented or disseminated to interested parties.

HPC points out, the title of the memorial refers to a “task force” while the memorial refers to a “working group.”

## **ALTERNATIVES**

HPC states the Family Planning Program and the Adolescent Pregnancy Prevention Program of DOH currently “provide the requested responsibilities of the working group that would be created.”

GAC/mew